

August 14, 2006

## INTAKE REGISTRATION

**1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook updates procedures for receiving and processing applications for VA health care.

**2. SUMMARY OF CHANGES.** This VHA Handbook provides information on the latest Public Law 104-262, The Veteran's Health Care Eligibility Reform Act of 1996, which required the Department of Veterans Affairs (VA) to establish and implement a national enrollment system to manage its delivery of health care benefits.

**3. RELATED ISSUES.** VHA Handbooks 1601A.02 through 1601E.01 (to be published).

**4. RESPONSIBLE OFFICE.** The Chief Business Office (16) is responsible for the contents of this VHA Handbook. Questions may be addressed to 202-254-0406.

**5. RESCISSIONS.** VHA Manual M-1, Part 1, Medical Administration Activities, Chapter 16, is rescinded.

**6. RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before the last working day of August 2011.

Michael J. Kussman, MD, MS, MACP  
Acting Under Secretary for Health

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## INTAKE REGISTRATION

### 1. PURPOSE

This Veterans Health Administration (VHA) Handbook provides information on the Department-wide procedures for intake registration, which is the receipt and processing of an application for enrollment for Department of Veterans Affairs (VA) health care benefits.

### 2. AUTHORITY

Public Law (Pub. L.) 104-262, The Veteran's Health Care Eligibility Reform Act of 1996, requires VA to establish and implement a national enrollment system to manage its delivery of health care benefits. It further provides that most veterans must be enrolled to receive care.

*NOTE: For information on veterans who may be exempt from enrollment requirements, see Paragraph 6.*

### 3. DEFINITIONS

a. **Adjudication.** In VA, adjudication usually refers to the process of obtaining and reviewing the facts in a particular claim to make a decision whether to grant benefits in view of the laws governing these benefits.

b. **Aid and Attendance (A&A).** A&A is the increased compensation and pension paid to veterans, their spouses, surviving spouses, and parents. A&A may be provided if there is a need for the regular aid and attendance of another person.

c. **Applicant.** An applicant is a person who has submitted a written request for VA health care benefits and/or for enrollment in the VA Health Care System.

d. **VA Form 10-10EZ, Application for Health Benefits.** The VA form completed by veterans to apply for VA health care benefits or enrollment in the VA Health Care System.

e. **Application for Health Benefits Renewal, VA Form 10-10EZR.** VA Form 10-10EZ is the form that veterans may use to update their personal, insurance, and financial information.

f. **Attributable Income.** Attributable income is the income of a veteran's household (that is, the veteran, spouse, and dependent children) for the preceding calendar year, as determined in accordance with VA regulations, which are used to determine if a veteran may be enrolled in certain priority groups.

g. **Compensable Disability.** Compensable disability is a VA-rated service-connected (SC) disability for which monetary compensation is authorized for payment.

h. **Catastrophically Disabled.** Catastrophically disabled is a permanent, severely disabling injury, disorder, or disease that compromises the ability to carry out the activities of daily living to such a degree that the individual requires personal or mechanical assistance to leave home or

bed, or requires constant supervision to avoid physical harm to self or others. **NOTE:** *The complete definition is at [38 Code of Federal Regulations \(CFR\) 17.36\(e\)](#).*

i. **Copayment (Copay).** Copay is a specific monetary charge for either medical services or medications provided by VA to veterans.

j. **Emergency Medical Care.** Emergency medical care is medical care that is needed immediately to avoid threats to life or health of the veteran.

k. **Enrollment Group Threshold (EGT).** EGT is the limit between enrollment priority group or subgroups, as determined by the Secretary of Veterans Affairs, above which enrollment groups or subgroups may be accepted for enrollment in the VA Health Care System.

l. **Financial Assessment.** Financial assessment is the process used by VA to assess a veteran's attributable income and assets. The financial assessment determines veterans' copay responsibilities and helps to determine enrollment priority and eligibility for beneficiary travel.

m. **Geographic Means Test (GMT).** GMT is the financial assessment used to determine if a veteran may be enrolled in priority 7.

n. **Hardship.** The term "hardship" refers to a temporary decrease in a veteran's household income justifying enrolling a veteran in a higher priority group than would otherwise be the case, and resulting in exemption from current and future copays from date of approval until a new means test is required.

o. **Means Test (MT).** MT is the financial assessment process used by VA to assess a veteran's attributable income and assets. The MT determines veterans' copay responsibilities and assists in determining enrollment priority group assignment. VA uses the appropriate MT threshold for the current calendar year to determine whether the veteran is considered unable to defray the expenses of necessary care.

p. **Minimum Active Duty Period.** The minimum period of active duty service that many veterans who served after September 7, 1980, must have served in order to receive most VA benefits (see [38 CFR §3.12a](#) ).

q. **Non-compensable Disability.** A Non-compensable disability is a disability that VA adjudicates as not warranting the award of monetary compensation.

r. **Nonservice Connected (NSC) Veteran.** An NSC veteran is one who does not have a VA-adjudicated illness or injury incurred in, or aggravated by, military service.

s. **Service Connected (SC) Veteran.** An SC veteran is one who has an illness or injury incurred in, or aggravated by, military service as adjudicated by the Veterans Benefits Administration (VBA).

t. **Urgent.** An urgent condition is one which does not require immediate admission, but one for which there is a pressing need for medical attention to prevent:

- (1) Deterioration of the condition, or
- (2) Impairment of the possible recovery.

u. **Veteran.** In general, a veteran is a person who:

- (1) Served in the active military, naval, or air service, and
- (2) Was discharged or released from service under conditions “other than dishonorable.”

***NOTE:*** For more information on the definition of veteran and for other service that may qualify an individual for veteran status, see: [38 CFR §3.1](#), [§3.6](#) and [§3.7](#).

#### **4. SCOPE**

This handbook provides details on the following topics:

- a. Disclosure to veterans about the need to enroll,
- b. Veterans who are exempt from enrollment,
- c. Evidence of a veteran’s military status,
- d. General application completion requirements,
- e. Financial disclosure,
- f. Application signatory requirements,
- g. Enrollment renewal, and
- h. Emergency or urgent care situations.

#### **5. DISCLOSURE TO VETERANS OF THE NEED TO ENROLL**

a. VHA staff must advise the veteran-applicant that most veterans must be enrolled in order to receive VA hospital and outpatient care.

b. All veteran-applicants must be asked if they wish to enroll in the VA Health Care System. If a veteran declines enrollment, the VHA staff member records the response for internal reporting requirements.

## 6. VETERANS WHO ARE TOTALLY OR PARTIALLY EXEMPT FROM ENROLLMENT

a. Under [38 CFR §17.37](#), the following veterans are totally or partially exempt from enrollment in the VA Health Care System:

- (1) Veterans who are VA-rated as being 50 percent SC, or more, are totally exempt.
- (2) Veterans with a VA-rated SC disability are exempt for care for that disability.
- (3) Veterans who were discharged or released from active military service for a disability incurred or aggravated in the line of duty are exempt for care for that disability for the 12-month period following discharge or release.
- (4) Veterans with a compelling medical need to complete a course of VA treatment started when the veteran was enrolled in the VA Health Care System are exempt for that treatment.
- (5) Veterans participating in VA's vocational rehabilitation program (Chapter 31) are exempt for care authorized in [38 CFR §21.240](#).
- (6) Veterans requesting examination to determine whether the veteran is catastrophically disabled and therefore eligible for inclusion in a priority category 4, are exempt for that examination.

b. Veterans may receive care included in the Medical Benefits Package without enrolling based on factors other than veteran status as authorized by [38 CFR §§17.37\(f\)-\(h\)](#).

**NOTE:** Under [38 CFR §17.37\(i\)](#), certain types of VA care not included in the Medical Benefits Package may be provided if authorized by statute or other relevant sections of the 38 CFR (e.g., humanitarian care, compensation and pension exams, special registries, dental care, etc.).

## 7. EVIDENCE OF MILITARY SERVICE

a. Every effort should be taken to obtain a veteran's service record information, which includes length, time, and character of service, at the time of the application for benefits. This information may be found:

(1) In military records provided by the veteran at the time of application. **NOTE:** For information on military records, see subparagraph 7b.

(2) In Veterans Health Information System and Technology Architecture (VistA) for veterans who have previously applied for benefits with the VA. Inquiries into VistA may only be submitted by an authorized VHA employee. **NOTE:** For more information on VistA queries, see [VHA Procedure Guide \(PG\).1601A.01.3.2](#) (for internal VHA use only).

b. The following table identifies military records that may provide acceptable evidence of a veteran's military service.

**NOTE:** Veterans may obtain military service records by submitting a request in writing to the National Personnel Records Center (NPRC). The request may be in the form of a letter or a completed SF 180, Request for Military Records (see <http://www.archives.gov/st-louis/military-personnel/standard-form-180.html>). VHA has the duty to assist veterans in this task if the veteran has lost service-related records or is experiencing physical or psychological disability or economic hardship. Local Veterans Service Organizations (VSOs) and/or chapters may also provide assistance to veterans in obtaining service records.

	Document	Description
(1)	(a) DD 214, Armed Forces of The United States Report of Transfer or Discharge  (b) DD 256, Honorable Discharge Certificate  (c) NAVPERS 553, Notice of Separation from U.S. Naval Service  (d) NAVMC 553, Notice of Separation from U.S. Marine Corp, and  (e) NAVCG 553, Notice of Separation from U.S. Coast Guard	The official certificate of release or discharge paper from the military used to support a veteran's eligibility for VA health care benefits.
(2)	DD 215, Correction to DD FORM 214, Certificate of Release or Discharge From Active Duty	This is an amended DD 214. It may reflect a correction of the original DD 214.
(3)	Award Letter	An official notification letter to a veteran from the Regional Office (RO) informing the veteran of the decision regarding Compensation and Pension.

	Document	Description
(4)	<p>(a) WD AGO Form 53-55, Enlisted Record and Report of Separation - Honorable Discharge</p> <p>(b) WD AGO Form 53-98, Military Record and Report of Separation Certificate of Service</p> <p>(c) WD AGO Form 53, Enlisted Record and Report of Separation Honorable Discharge</p> <p>(d) WD AGO Form 55, Honorable Discharge from The Army of the United States, and</p> <p>(e) WD AGO Form 280, Certificate of Service, AVS</p>	Discharge and enlistment record documents prior to establishment of DD 214s, commonly used for World War II (WWII) and Korean records of active duty.
(5)	Rating Decision	<p>An official notification to a veteran from the RO after a decision is made regarding the veteran's claim.</p> <p><b>NOTE:</b> <i>An award letter often accompanies the rating decision.</i></p>

## 8. GENERAL APPLICATION COMPLETION REQUIREMENTS.

a. Veterans must complete the applicable information on VA Form 10-10EZ to apply for:

- (1) Hospital and Outpatient services, and
- (2) Enrollment.

b. Veterans may be asked to complete the applicable information on VA Form 10-10EZ to apply for:

- (1) Nursing Home Care,
- (2) Domiciliary Care, and
- (3) Dental Services,

**NOTE:** *A veteran need not be seeking immediate care to be enrolled.*



b. The following table identifies information veterans must provide on VA Form 10-10EZ, based on their application type.

**NOTE:** An application is considered incomplete until all required fields are answered and the veteran has signed and dated the application.

	Veteran Status	Information to Complete
(1) )	SC 50 percent to 100 percent	<ol style="list-style-type: none"> <li><u>1.</u> General Information,</li> <li><u>2.</u> Insurance Information,</li> <li><u>3.</u> Employment Information,</li> <li><u>4.</u> Military Service Information, and</li> <li><u>5.</u> Assignment of Benefits.</li> </ol>
(2) )	(a) SC 30 percent to 40 percent. (b) SC 0 percent (compensable) or SC 10 percent to 20 percent. (c) Former Prisoner of War (POW). (d) Purple Heart (PH) recipients, or discharged from the military due to a disability incurred in, or aggravated by, service.	<ol style="list-style-type: none"> <li><u>1.</u> General Information,</li> <li><u>2.</u> Insurance Information,</li> <li><u>3.</u> Employment Information,</li> <li><u>4.</u> Military Service Information, and</li> <li><u>5.</u> Assignment of Benefits.</li> </ol> <p><b>NOTE:</b> A veteran may agree to enrollment in priority 8 with copays without completing the financial information part of the form. For information on financial disclosure, see paragraph 9.</p>
(3) )	(a) Receiving NSC VA-pension, A&A, or Housebound (HB) benefits, or  (b) SC 0 percent (non-compensable) or NSC with no special eligibilities (VA-pension, A&A, or HB, benefits)	<ol style="list-style-type: none"> <li><u>1.</u> General Information</li> <li><u>2.</u> Insurance Information</li> <li><u>3.</u> Employment Information</li> <li><u>4.</u> Military Service Information</li> <li><u>5.</u> Financial Disclosure, including previous calendar year net worth, and</li> <li><u>6.</u> Assignment of Benefits</li> </ol> <p><b>NOTE:</b> A veteran may agree to copays without completing the financial information part of the form. For information on financial disclosure, see paragraph 9.</p>

c. For more detailed information on the guidelines and requirements for completing VA Form 10-10EZ, see [VHA.PG.1601A.01.1.1](#) (for internal use only) at <http://vaww1.va.gov/CBO/policy/policyguides/index.asp>.

## 9. FINANCIAL DISCLOSURE

a. **How Financial Information Is Used.** VHA has an obligation under [38 CFR §17.47\(d\)](#) to collect income information from certain applicants for medical care. Financial information disclosed by a veteran (attributable income and net worth) is used by VHA to determine a veteran's:

- (1) Priority group for enrollment
- (2) Possible exemption from inpatient/outpatient and pharmacy copay requirements, and
- (3) Eligibility for other benefits such as beneficiary travel.

*NOTE: For information on priority group assignments, see (for internal use only) at <http://vaww1.va.gov/CBO/policy/policyguides/index.asp>.*

b. **Veterans Exempt from Financial Disclosure for hospital and outpatient care.** Veterans eligible to be enrolled in priority category 1, 2, 3, 6 and 8, may be enrolled in those categories without completing the financial portion of VA Form 10-10EZ.

*NOTE: Some of these veterans will need to provide VA with financial information if they wish to establish their eligibility for exemption from the medication copay requirement.*

c. **Veterans Who Choose Not to Disclose Financial Information.** Veterans who are not exempt from disclosing financial information, but choose not to do so are responsible for any applicable VA copays if they are enrolled and they may not be eligible for certain VA programs such as beneficiary travel.

d. **Attributable Income.** All income from any source must be counted, including salary, retirement, annuity payments, or similar income, unless specifically excluded under [38 CFR §3.272](#).

e. **MT Thresholds.** VA uses the appropriate MT threshold for the previous calendar year to determine whether the veteran is considered unable to defray the expenses of necessary care.

*NOTE: For the most current VA MT thresholds, see [http://www.va.gov/healtheligibility/costs/above\\_nmt.asp](http://www.va.gov/healtheligibility/costs/above_nmt.asp).*

f. **GMT Thresholds.** VA uses the United States (U.S.) Department of Housing and Urban Development's (HUD) geographic-based "low-income" limits as threshold for VA's GMT. These numbers are obtained from HUD based on their low-income geographic-based income criteria. *NOTE: For VA GMT thresholds for the current year, see [http://www.va.gov/healtheligibility/costs/GMT\\_tips.asp](http://www.va.gov/healtheligibility/costs/GMT_tips.asp).*

g. **Application for Hardship Based on Projected Income.**

(1) A hardship determination based on a means test is available if:

(a) The veteran's income for the previous year is above the MT threshold, and

(b) The current projection of a veteran's income for the year following application for care is substantially below the MT threshold for the current year.

(2) A hardship determination based on GMT is available if the projected income for the current year of the veteran, spouse, and dependent children is below the low-income identified in subparagraph 9g. **NOTE:** For information on processing a hardship request, see [VHA.PG.1601A.01.4.E](http://vaww1.va.gov/CBO/policy/policyguides/index.asp) (for internal VHA use only) at <http://vaww1.va.gov/CBO/policy/policyguides/index.asp>.

**10. HEALTH BENEFITS ENROLLMENT RENEWAL.** Once veterans have been enrolled in the VA Health Care System, re-enrollment occurs annually unless:

a. **Re-Enrollment of Veterans Exempted From Financial Assessment.** Veterans who are exempt from financial assessment are re-enrolled automatically at the end of their annual enrollment period, unless they submit a signed document stating that they no longer wish to be enrolled or unless VA determines it will not enroll their group.

b. **Re-Enrollment of Veterans Subject to Financial Assessment.** Veterans who are subject to a financial assessment are required to update and report financial information, using VA Form 10-10EZR, to VA each year to prevent their status from lapsing. **NOTE:** For more information on re-enrollment see <http://vaww1.va.gov/CBO/policy/policyguides/index.asp>.

**11. EMERGENCY OR URGENT CARE SITUATIONS**

a. **Determination of an Emergent or Humanitarian Condition.** Directors of VA health care facilities are responsible for establishing written procedures to ensure that patients with medical or psychiatric problems are screened to determine if their need is emergent or urgent.

b. **Emergent Conditions.** If, as a result of a VA health care screening, it is determined that the patient is in need of emergency care, that patient must be examined promptly and furnished with the necessary care.

**NOTE:** The determination of eligibility for benefits for patients with emergent conditions can be made after the initial examination and essential treatment. Based on the patient's medical condition, the examining physician determines whether an administrative interview is permitted and to what extent the patient may be questioned.

d. **Humanitarian Care for Ineligible Applicants with Emergent Conditions**

(1) If the applicant requires emergency care and has been determined to be administratively ineligible for enrollment, the applicant must be provided humanitarian emergency care, but only until the applicant's condition has stabilized and the applicant can be safely transferred to a community health care facility.

(2) Ineligible applicants receiving humanitarian emergency care may include the following:

a) Non-veterans, such as

1. Visitors,

2. Family members, or

3. Persons with no military service.

(b) Applicants with discharges other than honorable when adjudicated by VBA as a bar to VA health care benefits

(c) Veterans who do not meet minimum active duty requirements if applicable and

(d) Veterans in a priority or subpriority group which is denied enrollment.

(3) Billings for humanitarian emergency care are processed in accordance with [38 CFR §17.102 subsection \(b\)](#).